

**Small Business Programs Office**  
**UNIFIED CERTIFICATION PROGRAM**  
**MBE EVALUATION REPORT**  
**Washington Metropolitan Area Transit Authority (WMATA)**

<b>DATE:</b>
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<b>Submitted To: WMATA Certification Oversight Committee</b>	<b>Prepared By:</b>
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**ACTION REQUESTED**

<b>Cert Number:</b>	<b>Certify</b>	<b>3-Year Audit</b>	<b>Denial</b>
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**APPLICANT INFORMATION**

<b>Company Name</b>	
<b>Contact Person</b>	
<b>Business Structure</b>	
<b># Years in Business</b>	
<b>Street Address</b>	
<b>City/State/Zip Code</b>	
<b>Telephone/Fax Number(s)</b>	
<b>E-Mail Address</b>	
<b>Website</b>	
<b>Tax I.D.</b>	

**DESCRIPTION OF SERVICES OFFERED (*As listed on Application*)**

**APPLICABLE NAICS CODES & DBE SIZE STANDARDS***(If Re-evaluation, indicate if the NAICS Codes requested are new areas of work)*

NAICS	SIZE	NEW	DESCRIPTION
<b>SUMMARY</b> <i>(including experience in industry, appropriate licenses, dealer, broker, etc.)</i>			

**EMPLOYEE/AVERAGE GROSS RECEIPTS** *(Preceding three (3) years)*

	Year 1 2018	Year 2 2019	Year 3 2020	3-Year AVERAGE	# EMPLOYEES
APPLICANT FIRM					
AFFILIATE(S)					
COMBINED RECEIPTS					
<b>SUMMARY</b> <i>(Including Financials &amp; Other Evidence of Affiliation)</i>					

**IDENTIFICATION OF OWNERS/OFFICERS***(Identify all Principal Owners and provide the Personal Net Worth of each Principal Owner that Disadvantaged Status is being considered)*

NAME	SHARES - % OWNED	TITLE	RACE	SEX	PERSONAL NET WORTH

**EVIDENCE OF MANAGEMENT AND CONTROL**  
**(Based on: Site visit Review of Documentation Other)**

<b>AREAS OF CONSIDERATION ( X )</b>		<b>YES</b>	<b>NO</b>	<b>NA</b>
<b>A (NO) response to any of these questions requires an explanation below</b>				
<b>1</b>	Is the firm independently owned, operated and controlled?			
<b>2</b>	Does the firm have a binding relationship with other firms that would affect its MBE status?			
<b>3</b>	Does a disadvantaged owner hold the highest position in the company?			
<b>4</b>	Does a disadvantaged owner control the Board of Directors?			
<b>5</b>	Does a disadvantaged owner control the day-to-day operations of the firm?			
<b>6</b>	Is a disadvantaged owner responsible for the hiring and firing of employees?			
<b>7</b>	Does a disadvantaged owner sign checks?			
<b>8</b>	Does a disadvantaged owner negotiate and sign contracts?			
<b>9</b>	Does a disadvantaged owner possess the necessary licenses, skills, education, and other abilities critical to the operation of this business?			
<b>10</b>	Does the disadvantaged owner have outside employment?			
<b>SUMMARY (Please expound on any of the above items and/or discuss other issues of importance)</b>				

## FINDINGS & CONCLUSIONS

*(Based on a comprehensive review of records and documentation in accordance with 49 CFR Part 26)*

CONCLUSIONS		YES	NO	N/A
<b>1</b>	Is the firm owned and controlled by disadvantaged owner(s)? <b>(Provide explanation below).</b>			
<b>2</b>	Does the average annual gross receipts for the preceding three (3) years exceed the applicable size standard for NAICS Codes?			
<b>3</b>	Does a disadvantaged owner possess the experience and skills necessary to manage and operate this company?			
<b>4</b>	Is the firm certified as MBE by any other jurisdiction(s)? <b>(If yes, then identify other certification(s) below).</b>			
<b>5</b>	Has the company performed or is currently performing on WMATA contracts? <b>(If yes, then identify the contract(s) below).</b>			
<b>6</b>	Were the dollar values of the firm's three (3) largest contracts over the last three (3) years provided? <b>(If yes, then list the contracts and their respective dollar values below).</b>			
<b>7</b>	Has the applicant submitted all of the information required/requested by the WMATA Certification Oversight Committee?			
<b>SUMMARY</b> <i>(Please expound on any of the above items and/or discuss other issues of importance)</i>				

## RECOMMENDATION & APPROVAL

<b>Following a thorough review and analysis of the information submitted by the above-mentioned applicant, it is the recommendation of the Compliance Specialist that the applicant firm request for certification be:</b>		
<b>Approved</b>		<b>Denied</b>
<b>DBE Certification Specialist:</b>  <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">Signature</div> <div style="width: 45%;">Date</div> </div>		